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SERIAL NUMBER 10/672,177	FILING OR 371(c) DATE 09/26/2003 RULE	CLASS 435	GROUP ART UNIT 1636	ATTORNEY DOCKET NO. 1435-1
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 09/981,073 10/16/2001 ABN which is a CIP of 09/526,401 03/15/2000 ABN

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ****

** 12/22/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 2	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verifier and Acknowledged Examiner's Signature Initials				

ADDRESS

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TITLE

DNA for expression of alpha 1-antitrypsin in methylotropic yeast

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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